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PTO/SB/22 (10-04)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004) | | Docket Number (Optional) 10253-00136-US | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------|--|-----------|-----|------------------|--|---|----------|---------|-----------|---|----------|----------|----------|---|----------|----------|----------|--|------------|----------|----------|--|------------|------------|----------|
| Application Number 09/727,207-Conf. #2829 | Filed November 30, 2000 | | | | | | | | | | | | | | | | | | | | | | | | | |
| For STITCHED PILE SURFACE STRUCTURE | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit 1733 | Examiner J. L. Goff | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> <th></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$110.00</td> <td>\$55.00</td> <td>\$ 110.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$430.00</td> <td>\$215.00</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$980.00</td> <td>\$490.00</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1,530.00</td> <td>\$765.00</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2,080.00</td> <td>\$1,040.00</td> <td>\$ _____</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0185</u>. I have enclosed a duplicate copy of this sheet.</p> | | | | Fee | Small Entity Fee | | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110.00 | \$55.00 | \$ 110.00 | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$430.00 | \$215.00 | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$980.00 | \$490.00 | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1,530.00 | \$765.00 | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2,080.00 | \$1,040.00 | \$ _____ |
| | Fee | Small Entity Fee | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110.00 | \$55.00 | \$ 110.00 | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$430.00 | \$215.00 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$980.00 | \$490.00 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1,530.00 | \$765.00 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2,080.00 | \$1,040.00 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input type="checkbox"/> attorney or agent of record. Registration Number _____</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a) <u>47,341</u></p> <p><u>Myron Keith Wyche</u> Signature</p> <p><u>Myron Keith Wyche</u> Typed or printed name</p> <p><u>(202) 331-7111</u> Telephone Number</p> <p>NOTE: Signatures of all inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |